

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) SPO.124							
I hereby certify that this correspondence is being electronically transmitted to the United States Patent and Trademark Office on May 6, 2010. Signature <u>David Saliwanchik</u> Typed or printed name <u>David R. Saliwanchik</u>		In re Application of: Tadao Saito <i>et al.</i> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Application Number 10/561,022</td> <td style="padding: 2px;">Filed December 16, 2005</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For Use of Toll-Like Receptor-Expressing Cells</td> </tr> <tr> <td style="padding: 2px;">Art Unit 1646</td> <td style="padding: 2px;">Examiner Zachary C. Howard</td> </tr> </table>		Application Number 10/561,022	Filed December 16, 2005	For Use of Toll-Like Receptor-Expressing Cells		Art Unit 1646	Examiner Zachary C. Howard
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Applicants hereby appeal to the Board of Patent Appeals and Interferences from the last decision of the examiner.									
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <u>540.00</u>							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____							
<input type="checkbox"/> A check in the amount of the fee is enclosed.									
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.									
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.									
<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. _____. I have enclosed a duplicate copy of this sheet.									
<input type="checkbox"/> The fee for a three-month extension of time under 37 CFR 1.136(a) has been simultaneously paid.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the									
<input type="checkbox"/> applicant/inventor.		<u>David Saliwanchik</u> Signature							
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>David Saliwanchik</u> Typed or printed name							
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>31,794</u>		<u>(352) 375-8100</u> Telephone Number							
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>May 6, 2010</u> Date							
NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
<input type="checkbox"/> *Total of _____ forms are submitted.									

This collection of information is required by 37 CFR 1.191. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.